PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

appropriate. All further	correspondence includi ed below or directed ot	ng the Patent, advance of	orders and notification of m	naintenance fees w	ill be mailed to the curren	t correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
Lynn L. Augsp IBM Corporatio 2455 South Roa Poughkeepsie, N	ourger n d, P386	DEC 1	State	eby certify that thing Postal Service we seed to the Mail	tificate of Mailing or Tran is Fee(s) Transmittal is beir rith sufficient postage for fi Stop ISSUE FEE address TO (571) 273-2885, on the	ng deposited with the United rst class mail in an envelope is above, or being facsimile date indicated below.	
12/19/2008 HVUUN	32 00000031 090463	10603251				(Depositor's name)	
01 FC:1504 02 FC:1501	300.00 DA 1510.00 DA	W. I. W.				(Signature)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET,NO.	CONFIRMATION NO.	
10/603,251 TITLE OF INVENTION	06/25/2003 I: MULTIPROCESSOR	SYSTEM WITH DYNA	Thomas J. Heller JR. MIC CACHE COHERENC	Y REGIONS	POU920020123US1	3683	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DU	E DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	12/18/2008	
EXAM	IINER	ART UNIT	CLASS-SUBCLASS				
PARIKH	, KALPIT	2187	711-141000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attor	the names of up to 3 registered patent attorneys agents OR, alternatively, the name of a single firm (having as a member a istered attorney or agent) and the names of up to agistered patent attorneys or agents. If no name is ed, no name will be printed. 1 Lynn L. Augspurger 2			
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI Internation	less an assignee is ident th in 37 CFR 3.11. Com GNEE onal Business	ified below, no assignce pletion of this form is NO Machines Corpo	T a substitute for filing an a (B) RESIDENCE: (CITY Dration, Armonk	tent. If an assignous ssignment. and STATE OR C	OUNTRY)	document has been filed for	
a. The following fcc(s) are submitted: State Stat			b. Payment of Fec(s): (Please A check is enclosed. Payment by credit care The Director is hereby overpayment, to Depos	i. Form PTO-2038	is attached.	e shown above) deficiency, or credit any an extra copy of this form).	
a. Applicant claim	tus (from status indicate is SMALL ENTITY state	us. See 37 CFR 1.27.		•	LL ENTITY status. Sec 37 (
OTE: The Issue Fee and terest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte tes Patent-and Trademark	d from anyone other than the Office.	e applicant; a regi	stered attorney or agent; or	the assignee or other party in	
Authorized Signature	//1/	Marja	rea	Date	7/26)2	008	
Typed or printed name	7			Registration N			
his collection of information application. Confiden ubmitting the complete	ration is required by 37 C tiality is governed by 35 d application form to the	CFR 1.311. The information U.S.C. 122 and 37 CFR in USPTO. Time will vary	on is required to obtain or re 1.14. This collection is esti- depending upon the indivi-	etain a benefit by the mated to take 12 m dual case. Any co	he public which is to file (an innutes to complete, including mments on the amount of the complete of the comp	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O.	

T Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

09/18/2008

Lynn L. Augspurger **IBM** Corporation 2455 South Road, P386 Poughkeepsie, NY 12601



Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

	(Depositor's name)
	(Signature)
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET.NO.	CONFIRMATION NO.	
10/603,251	06/25/2003	Thomas J. Heller JR.	POU920020123US1	. 3683	
THE OC DIVIDITION. AND TIPROCESCOD SYSTEM WITH DIVIDITION OF CHESCONES AND CONTRACTORS					

					.4.	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	12/18/2008
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS			
PARIKH	, KALPIT	2187	711-141000			;
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR, alternation (2) the name of a single registered attorney or a	o 3 registered patent attornively, le firm (having as a membagent) and the names of unneys or agents. If no name	per a 2	Augspurger
3. ASSIGNEE NAME A	ND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or ty)	pe)		
PLEASE NOTE: Un recordation as set for	less an assignee is ident th in 37 CFR 3.11. Com	tified below, no assignce pletion of this form is NO	data will appear on the p T a substitute for filing an	atent. If an assignee is it assignment.	dentified below, the doc	ument has been filed fo
(A) NAME OF ASSIGNEE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
-	1 7 .					

International Business Machines Corporation, Armonk, New York

lease check the appropriate assignee category or categories (will	not be printed on the patent): Limitalian La Corporation or other private group entity Li Governmen
a. The following fec(s) are submitted:	4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)
Issue Fee	A check is enclosed.
Publication Fcc (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is attached.
Advance Order - # of Copies	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 09-0463 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent-and Trademark Office.

Authorized Signature

Typed or printed name

Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.